


TO THE OFFICERS AND MEMBERS:


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Capt'd Post No. *22* Dep't of *Missouri* G. A. R.

I have the honor to make application for membership in *Capt'd* Post No. *22* of *Mo.* Grand Army of the Republic, basing my application on the following facts:

I am *44* years of age, and was born in *Jackson Co.* State of *Ohio*, now residing at *Kirksville* State of *Missouri*, am by occupation a *Farmer*

I served during the late rebellion as follows:

First enlisted *August 5th* 1861, as *Private* in Co. "*6*" *33rd* Regiment *Ohio Cavalry* for the period of *3* years, and was discharged therefrom as *Private*, at *Grayville Georgia* on the *25* day of *April* 1864, by reason of *Disability*

¹ I also re-enlisted *February 12th* 1864, as *Private* in Co. "*6*" *33rd* Regiment *Ohio Cavalry* and was discharged therefrom as *1st Sergeant* at *Yazooville Ky.* on the *12th* day of *July*, 1865, by reason of *Wound*

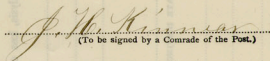
I have never borne arms against the United States, and have never been convicted by Court-Martial of Desertion, nor of any other infamous crime.

I have *not* made previous application for membership to the Grand Army of the Republic and filed the same with _____ Post No. _____ Department of _____ on the _____ day of _____ 18

(Signature.) *Louis Spriggs*
 Residence, No. _____ at *Kirksville* Street

I on honor recommend *Louis Spriggs* to the favorable consideration of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$ *2.00*


 (To be signed by a Comrade of the Post.)

Note.—If any details herein required are omitted, they must be furnished before being reported on by the Committee.

1 If other enlistments, they are to be added.
 2 If this is the first application, write the word "not" in this space.

APPLICATION OF

Lewis Spriggs

Late 1st Geny Co. E

Reg't 33d Ohio Inf for

Membership in the Grand Army of the Republic.

Recommended by C. M. Brady

J. H. Kinnear

HEADQUARTERS

Corporal G. D. Post No. 22

Department of MO. Nov. 24 1882

Received and referred to the Examining Committee.

R. H. Browne

Post Commander

Nov. 14th 1882

The undersigned Examining Committee respectfully report favorably upon the within application.

J. H. Kinnear
R. H. Browne
John Shaver
Committee.

Applicant { Elected Nov. 24th 1882
Mustered June 27th 1885

No. on Des. Book

Adjutant

Notified to bring Discharge or Muster Out Roll July 31/83

Refuge card

To be Filled by, or for, the Post Surgeon, on or before the Night of muster of this Applicant.

1. No. on Des. Book 2. Name

3. Where born 4. Color

5. Regiment or Vessel serving in when wounded

6. What Army or Squadron

(As Army of the Potomac, Mississippi Squadron, &c., &c.)

7. Branch of service, (Inf, Art., Cav., Marine, Sailor, &c.)

8. How many times wounded? 9. Ages when wounded

10, 11. Dates when wounded and names of engagements

12. Parts of the body wounded or disabled

13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars

14. Kind of missile

15. Rank when wounded

NOTE.—IF NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY.

Entered on Medical Description Book No.

Reported to Department Headquarters

Post Surgeon.